

**APPLICATION DATA SHEET****Application Information**

Application Type: National Phase  
Subject Matter: Utility  
Suggested Classification:  
Suggested Group Art Unit:  
CD-ROM or CD-R?: None  
Number of CD disks:  
Number of copies of CDs:  
Sequence submission?:  
Computer Readable Form (CRF):  
Number of copies of CRF:  
Title: USE OF SURFACTANT PREPARATIONS  
FOR THE TREATMENT OF SURGICAL  
ADHESIONS  
Attorney Docket Number: 27184U  
Request for Early Publication?: No  
Request for Non-Publication?: No  
Suggest Drawing Figure:  
Total Drawing Sheets: 1  
Small Entity?: No  
Latin name:  
Variety denomination name:  
Petition included?: No  
Petition Type:  
Licensed U.S. Govt. Agency:  
Contract or Grant Numbers:  
Secrecy Order in Parent Appl.?:

**Applicant Information**

Applicant Authority type: Inventor  
Primary Citizenship Country: DE  
Status: Full Capacity  
Given Name: Dietrich  
Middle Name:

Family Name: HAEFNER  
Name Suffix:  
City of Residence: Konstanz  
State or Province of Residence:  
Country of Residence: DE  
Street of Mailing address: Beethovenstrasse 5,  
City of mailing address: Konstanz  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78464

**Applicant Information**

Applicant Authority type: Inventor  
Primary Citizenship Country: DE  
Status: Full Capacity  
Given Name: Ralf  
Middle Name:  
Family Name: HARAND  
Name Suffix:  
City of Residence: Reichenau  
State or Province of Residence:  
Country of Residence: DE  
Street of Mailing address: Untere Rheinstrasse 31,  
City of mailing address: Reichenau  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78479

**Applicant Information**

Applicant Authority type: Inventor  
Primary Citizenship Country: DE  
Status: Full Capacity  
Given Name: Eva  
Middle Name:  
Family Name: AMMON  
Name Suffix:

City of Residence: Allensbach  
State or Province of Residence:  
Country of Residence: DE  
Street of Mailing address: Standweg 9d,  
City of mailing address: Allensbach  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78476

**Applicant Information**

Applicant Authority type: Inventor  
Primary Citizenship Country: DE  
Status: Full Capacity  
Given Name: Ernst  
Middle Name:  
Family Name: STURM  
Name Suffix:  
City of Residence: Konstanz  
State or Province of Residence:  
Country of Residence: DE  
Street of Mailing address: Bohlstrasse 14,  
City of mailing address: Konstanz  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78465

**Applicant Information**

Applicant Authority type: Inventor  
Primary Citizenship Country: DE  
Status: Full Capacity  
Given Name: Klaus  
Middle Name:  
Family Name: EISTETTER  
Name Suffix:  
City of Residence: Konstanz  
State or Province of Residence:

Country of Residence: DE  
Street of Mailing address: Saentisblick 7,  
City of mailing address: Konstanz  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78465

**Applicant Information**

Applicant Authority type: Inventor  
Primary Citizenship Country: DE  
Status: Full Capacity  
Given Name: Friedemann  
Middle Name:  
Family Name: TAUT  
Name Suffix:

City of Residence: Konstanz  
State or Province of Residence:  
Country of Residence: DE  
Street of Mailing address: Zeppelinstr. 6,  
City of mailing address: Konstanz  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78464

**Applicant Information**

Applicant Authority type: Inventor  
Primary Citizenship Country: DE  
Status: Full Capacity  
Given Name: Thomas  
Middle Name:  
Family Name: MUELLER  
Name Suffix:  
City of Residence: Konstanz  
State or Province of Residence:  
Country of Residence: DE  
Street of Mailing address: Sepp-Biehler-Str. 5,

City of mailing address: Konstanz  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78464

**Representative Information**

<b>Representative Customer Number:</b>	034375
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**Domestic Priority Information**

<b>Application:</b>	<b>Continuity Type:</b>	<b>Parent Application:</b>	<b>Parent Filing Date:</b>

**Foreign Priority Information**

<b>Country:</b>	<b>Application number:</b>	<b>Filing Date:</b>	<b>Priority Claimed:</b>
EP	03019446.8	28 August 2003 (28.08.2003)	Yes

**Assignee Information**

Assignee name: Altana Pharma AG  
Street of mailing address: Byk-Gulden-Str. 2  
City of mailing address: Konstanz  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78467